OMB Number: 2040-0194 **Approval Expires:** 07/31/01

Information Collection Underground Injection Control (UIC) Class V Well Study In-Situ Fossil Fuel Recovery Wells

U.S. Environmental Protection Agency Washington, DC 20460

NOTE: If there is a more appropriate person to complete this questionnaire, please forward it.

Please provide missing information and/or update the contact information provided below.

	Contact
State:	
Name of Contact:	
Name of Agency:	
Street Address:	
City, State Zip:	
Phone Number:	
E-mail Address:	

If you have any questions or need assistance filling out this questionnaire, please contact:

Class V Coordinator (703) 931-8700

EPA is required to collect this information as part of its consent decree with the Sierra Club, which was amended in 1997. EPA is authorized to collect this information under § 1421 of the SDWA, 42 USC §300h. Responses to this collection are voluntary. The public reporting and recordkeeping burden for this collection of information is estimated to average 2 hours per response. Burden means the total time, effort, or financial resources expended by persons to generate, maintain, retain, or disclose or provide information to or for a Federal agency. This includes the time needed to review instructions; develop, acquire, install, and utilize technology and systems for the purposes of collecting, validating, and verifying information, processing and maintaining information, and disclosing and providing information; adjust the existing ways to comply with any previously applicable instructions and requirements; train personnel to be able to respond to a collection of information; search data sources; complete and review the collection of information; and transmit or otherwise disclose the information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations are listed in 40 CFR Part 9 and 48 CFR Chapter 15. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates, and any suggested methods for minimizing respondent burden, including through the use of automated collection techniques to the Director, OPPE Regulatory Information Division • U.S. Environmental Protection Agency (2137) • 401 M St., S.W. • Washington, D.C. 20460 • ; and to the Office of Information and Regulatory Affairs, Office of Management and Budget • 725 17th Street, N.W. • Washington, D.C. 20503 • Attention: Desk Officer for EPA. • Include the EPA ICR number and OMB control number in any correspondence. Do not send the completed form to this address.

Information Collection on In-Situ Fossil Fuel Recovery Wells

DEFINITION: In-situ fossil fuel recovery wells are used for in-situ recovery of lignite, coal, tar sands, and oil shale. The wells inject water, air, oxygen, solvents, combustibles, or explosives into underground coal or oil shale beds to liberate fossil fuels, so they can be extracted for surface use. Underground coal gasification (UCG) and in-situ oil shale retorting are two processes which use in-situ fossil fuel recovery injection wells.

We are only asking you to submit data that has already been collected by the State and is readily available. Please answer the following questions to the extent possible based on existing data.

We as	ulations are obtaining regulations from the State Underground Injection Control (UIC) program. If in-situ fossil fuel very wells are regulated under a separate statute or regulation, please provide the citation(s) or attach ropriate copies. 9 Check if attached.			
Num	ber of In-Situ Fossil Fuel Recovery Wells			
2a.	Indicate the number of in-situ fossil fuel recovery wells that can be documented in the State (excluding wells that have been permanently plugged and abandoned):			
2b.	In your judgement, does the number given in 2a accurately reflect the number of wells in the State? 9 Yes ÿ Go to Question 3. 9 No			
2c.	Please estimate the number of wells in the State (excluding wells that have been permanently plugged and abandoned):			
2d.	What is the source of the estimate given in 2c (e.g., survey, model, best professional judgement)?			
	Please explain the methodology used to derive the estimate.			

3. Location of In-Situ Fossil Fuel Recovery Wells

Please provide the location of each in-situ fossil fuel recovery well in your inventory. We prefer latitude and longitude coordinates (a). If that information is not available, please provide other location information such as zip code (b), county (c), Quarter/Section/Township/Range (Q/S/T/R) coordinates, or other identifying information (d). If you have a database containing this information, you may submit this information in any format that is convenient for you instead of completing the following table. If completing the table or submitting information will be extremely time consuming or financially burdensome, please contact the Class V coordinator (see cover page). Please copy this page if you need additional lines.

One well per line please.

Unique well	PLEASE COMPLETE (a), (b), (c), OR (d). WE PREFER (a).				
identifier (e.g., permit no., operator name)	(a) Latitude/ Longitude (to minutes)		(b) Zip Code	(c) County Name	(d) Other Location Information (e.g.,Q/S/T/R, UTM)
	Latitude	Longitude			

4.	Does the State regulate in-situ fossil fuel recovery wells as Class II or Class III wells, or place Class II or III
	requirements on them?

Does the State:	Yes	No
Regulate In-situ Fossil Fuel Recovery Wells as Class II or III Wells		
Place Class II or III Requirements on In-situ Fossil Fuel Recovery Wells		

Does the St	ate have construction or siting requirements for these wells?
9 Yes ÿ	Please describe briefly below, or attach appropriate information. 9 Check if information at
9 No ÿ	Go to Question 7.
Doog the St	ate conduct inspections or review records to ensure that construction/siting requirements are n
Does the St	
9 Yes	ÿ Please describe briefly below.
	ÿ Please describe briefly below.

9 Yes	ÿ Please describe briefly below, or attach appropriate information. 9 Check if informat attached.
9 No ÿ	Go to Question 9.
Does the St	tate conduct inspections or review records to ensure that operating requirements are met?
9 Yes 9 No	ÿ Please describe briefly below.
Does the St	tate require operators to conduct mechanical integrity tests (MITs)?
9 Yes	
9 No ÿ	Go to Question 12.
When are N	MITs required (check all that apply)?
	commencing injection.

•	Can you provide data on MIT failure rates in your state?					
	9 Yes 9 No	ÿ	Please attach such information. 9 Check if attached.			
•	We are interested in data on any constituents that may be injected into these wells (even if there are no drinking water standards associated with the contaminant). Is injectate quality (sampling) data available?					
	9 Yes 9 No	ÿ	From whom are these studies available?			
	•	Do you have any studies on injectate quality for similar wells that are regulated under the Class II or III programs in the State?				
	9 Yes 9 No	ÿ	From whom are these studies available?			

14.	Have there been any incidents in your State in which an in-situ fossil fuel recovery well contributed to contamination of an Underground Source of Drinking Water (USDW)? Contamination can include exceedances of Federal or State drinking water standards, ground water standards, or health advisory levels.					
	9Yes ÿ	brief summary for each incident. To the what happened, the impact on ground was	nt exists, please provide us a copy. If not, please provide a extent this information is available, include a description of ater quality or drinking water wells (public or private), the or county in which the incident occurred, and the name and b. 9 Check if description(s) attached.			
	9 No					
	9 Don't Kr	now				
		Please Go To Page 6 and Complete	the Additional Contacts Section.			
		Additional	Contacts			
from (dividuals that could help answer our question of a could help a c	ons on in-situ fossil fuel recovery wells. Include individuals as universities, as appropriate			
Namo	e/Title:		Name/Title:			
			Affiliation:			
Stree	et Address:		Street Address:			
Telep	ohone Number:		Telephone Number:			

Thank you for your assistance.

Please remember to:

- C Attach appropriate information.
- C Return this questionnaire
 In the pre-paid Federal Express envelope to:
 Class V Study Coordinator
 4900 Seminary Road
 Suite 600
 Alexandria, VA 22311

By fax to: Class V Study Coordinator (703) 931-8701